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FACSIMILE COVER SHEET

DATE: MARCH 23, 2006

NUMBER OF PAGES (INCLUDING THIS TRANSMITTAL COVER SHEET): 21

OUR REFERENCE: 224488

FROM: XAVIER PILLAI
REGISTRATION NO. 39,799

TO: MAIL STOP AF
UNITED STATES PATENT AND TRADEMARK OFFICE
COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313

FACSIMILE NUMBER: (571) 273-8300

IN RE APPLN. OF:	KOZEE ET AL.
APPLICATION NO.	10/800,426
FILED:	MARCH 12, 2004
GROUP ART UNIT:	1755
EXAMINER:	KOSLOW, CAROL M.
DOCKET NO.:	224488 (Client Reference No. D-676)

ATTACHED PLEASE FIND THE FOLLOWING DOCUMENTS:

- TRANSMITTAL IN DUPLICATE (2 PAGES)
- REPLY TO OFFICE ACTION (18 PAGES)

A confirmation copy of the transmitted document will:
☒ Not be sent. This will be the only form of delivery of the transmitted document.

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PAGE 1/21 * RCVD AT 3/23/2006 3:30:04 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/3 * DNIS:2738300 * CSID:312 616 5700 * DURATION (mm-ss):05-58

FORM PTO-1083

PATENT
Attorney Docket No. 224488
Client Reference No. D-676
Date: March 23, 2006

In re Application of: KOZEE et al.
Application No. 10/800,426
Filed: March 12, 2004
For: INK JET INK COMPOSITION AND METHOD FOR SECURITY MARKING

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a reply to office action in the subject application.

☐ Small entity status is claimed for this application under 37 CFR 1.27.

☒ Petition for an extension of time for the period noted below, as well as for any additional period necessary to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee.

☐ Other:

☒ Please charge Deposit Account No. 12-1216 in the total amount indicated below. A duplicate copy of this transmittal sheet is enclosed herewith.

					Small Entity		Other Than A Small Entity	
Time Extension Petition Fee			none		$ 0.00		$ 0.00	
	subtract time extension fee previously paid		none		($ 0.00)		($ 0.00)	
Claim Fee	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Add'l Claim Fee	Rate	Add'l Claim Fee
Total	140	Minus	157	= 0	x 25=	$	x 50=	$0.00
Independent	6	Minus	5	= 1	x 100=	$	x 200=	$200.00
☐ First Presentation of Multiple Claim					+ 180=	$	+ 360=	$
TOTAL AMOUNT TO BE CHARGED TO DEPOSIT ACCOUNT					Total	$	Total	$200.00

☒ The Commissioner is hereby authorized to charge any deficiencies in the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-1216.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,
LEYDIG, VOIT & MAYER, LTD.

By _____
Xavier Pillai, Reg. No. 39,799

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PAGE 3/21 * RCVD AT 3/23/2006 3:30:04 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/3 * DNIS:2738300 * CSID:312 616 5700 * DURATION (mm-ss):05-58

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Application No. 10/800,426

Applicant: Kozee et al.

Filed: March 12, 2004

TC/AU: 1755

Examiner: Koslow, Carol M.

Docket No.: 224488 (Client Reference No. D-676)

Customer No.: 23460

RESPONSE UNDER 37 CFR 1.116
EXPEDITED PROCEDURE

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

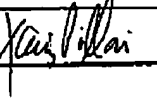
REPLY TO OFFICE ACTION

Sir:

In reply to the Office Action dated December 23, 2005, please enter the following amendments and consider the following remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 17 of this paper.

MAILING/TRANSMISSION CERTIFICATE UNDER 37 CFR 1.8 OR 1.10			
I hereby certify that this document and all accompanying documents are, on the date indicated below, being ☐ deposited with the U.S. Postal Service using "Express Mail" service in an envelope addressed in the same manner indicated on this document with Express Mail Label Number , ☐ deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed in the same manner indicated on this document, or ☒ facsimile transmitted to the U.S. Patent and Trademark Office at fax number: (571) 273-8300.			
Name (Print/Type)	Xavier Pillai		
Signature		*Date*	March 23, 2006

03/24/2006 SSESHE1 00000045 121216 10800426

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